

**TRAVEL EXPENSE CLAIM**

STD. 262 (REV. 7/2005)

*See Instructions and \*Privacy Statement On Reverse Side*

Page \_\_\_\_\_ of \_\_\_\_\_ Pages

CLAIMANT'S NAME Alan Trounson		SSN or EMPLOYEE NUMBER* [REDACTED]		DEPARTMENT CIRM	
POSITION President		CB/ID No.	DIVISION or BUREAU CIRM		INDEX NUMBER
RESIDENCE ADDRESS *			HEADQUARTERS ADDRESS 210 King St		TELEPHONE NUMBER (415) 396-9105
CITY		STATE	ZIP CODE	CITY	STATE
				San Francisco	CA
					94107

(1) MONTH/YEAR	(2) DATE	(2) TIME	(3) LOCATION WHERE EXPENSES WERE INCURRED	(4) LODGING	(5) MEALS			(6) INCIDENTALS	(7) TRANSPORTATION				(8) BUSINESS EXPENSE	(9) TOTAL EXPENSES FOR DAY	
					BREAK-FAST	LUNCH	O.T., L/T, N/C, RELO. OR DINNER		(A) COST OF TRANS.	(B) TYPE USED	(C) CARFARE, TOLLS, PARKING	(D) PRIVATE CAR USE			
										MILES	AMOUNT				
07/12	7/6	1800	Brisbane			16.29							16.29		
	7/11		Sydney						11.33				11.33		
	7/18	1800											0.00		
													0.00		
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<b>(10) SUBTOTALS</b>				0.00	0.00	16.29	0.00	0.00	11.33		0.00	0	0.00	0.00	27.62
<b>(10) COLUMN CODE (ACCTG. USE ONLY)</b>															

**CLAIM TOTAL** 27.62

(11) PURPOSE OF TRIP, REMARKS AND DETAILS (Attach receipts/vouchers when required) Expenses in Australia, July 2012	(12) NORMAL WORK HOURS [REDACTED]
	(13) PRIVATE VEHICLE LICENSE NUMBER [REDACTED]
	(14) MILEAGE RATE CLAIMED

**AGENCY ACCOUNTING OFFICE USE ONLY**  
PAID BY REVOLVING FUND CHECK NUMBER

(15) I HEREBY CERTIFY That the above is a true statement of the travel expenses incurred by me in accordance with DPA rules in the service of the State of California. If a privately owned vehicle was used, and if mileage rates exceed the minimum rate, I certify that the cost of operating the vehicle was equal to or greater than the rate claimed, and that I have met the requirements as prescribed by SAM Sections 0750, 0751, 0752, 0753 and 0754 pertaining to vehicle safety and seat belt usage.

CLAIMANT'S SIGNATURE: [REDACTED] DATE: 10-25-12

(16) SIGNATURE OF OFFICER APPROVING TRAVEL AND PAYMENT: [REDACTED] DATE: 10/26/2012

(17) SIGNATURE and TITLE (See Item 17 on reverse): [REDACTED] DATE:

OIS # 2012 PO # 1  
2012 PO # 1